POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION			First Named I	nventor	Waheed	YOUNIS			
				COMPLETE IF KNOWN					
(37 CFR 1.63)		Application Nu	mber						
	OR	Declaration Submitted After Initial Filing (37 CFR 1.16(e Required)	Filing Date						
			ter Group Art Unit						
With Initial Filing			6(e) Examiner Nam	e					
As a below named inventor, I hereby declare that:									
My residence, post office address, and citizenship are as stated below next to my name.  I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
Method for Tracking Motion Phase of an Object for Correcting Organ  Motion Artifacts in X-ray CT Systems									
the specification of which									
☑ is attached hereto OR									
as filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Numberand was amended on (MM/DD/YYYY)									
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.									
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.									
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365 (b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign			Foreign Filing Date		С	Certified Copy Atta	ched?		
Application Number(s)	C	ountry	(MM/DD/YYYY)	Priority Not Clain	ned	Yes	No		

**Attorney Docket Number** 

**COMBINED DECLARATION &** 

138-01 US

Additional foreign application numbers are listed on a supplementary priority data sheet (PTO/SB/02B) attached hereto:

## **COMBINED DECLARATION & POWER OF ATTORNEY-Utility or Design Patent Application**

Attorney Docket No. 138-01 US

I hereby appoint Practitioners at Customer Number 25319

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Direct all correspondence to:

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I hereby declare that all statements made herein of my own knowledge are true and that all statements were made on information and belief are believed to be true; and further that these statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such wilful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:	☐ A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any]) W	Family Name or Surname YOUNIS						
Inventor's Signature W. A. Y.	Date 9 March 2004						
Residence: City Toronto	Province Ontario	Country	Canada	Citizenship Canadian			
Mailing Address 75 Tandidge Crescer							
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NAME OF SECOND INVENTOR:	☐ A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])	Family Name or Surname STERGIOPOULOS						
Inventor's Signature	Date 9 March 2004						
Residence: City Toronto	Province Ontario	Country	Canada	Citizenship Canadian			
Mailing Address 10 Old York Mills Road, Suite #616							
City Toronto	Province Ontario	ZIP	M2P 2G9	Country Canada			
NAME OF THIRD INVENTOR:	☐ A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])	Family Name or Surname						
Inventor's Signature	Date						
Residence: City	Province	Country		Citizenship			
Mailing Address							
City ·	Province	ZIP,		Country			
Additional Inventors are being named on the supplemental Additional Inventors sheet PTO/SB/02A attached hereto.							